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KELLEY DRYE

COLLIER SHANNON

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October 12, 2007

Mail Stop AMENDMENT Commissioner For Patents P.O. Box 1450 Alexandria, VA 22313-1450

Re: U.S. Utility Patent Application No. 10/667,521

For: Apparatus and Method For Reducing Fluid Loss

DURING A SURGICAL PROCEDURE

Our Reference: 23660-00656

Dear Sir:

Transmitted herewith for filing in the U.S. Patent and Trademark Office in connection with the above-referenced application are the following documents:

(1) Transmittal (1 page);

(2) Fee Transmittal (in duplicate);

(3) Request for Extension of Time (3 months) (in duplicate); and

(4) Response to Restriction Requirement (2 pages).

Please charge any fees due for this submission to Deposit Account No. 03-2469.

Please date-stamp the enclosed copy of this letter, acknowledging receipt of the above-identified documents, and return it to us.

Sincerely yours,

JOHN N. COULBY, Reg. No. 43,56

Enclosures

cc: Hugh Trout

O \ P E 4007

JOHN N. COULBY

October 12, 2007

Date

PTO/SB/21 (10-07) Approved for use through 10/31/2007. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/667.521 TRANSMITTAL Filing Date September 23, 2003 First Named Inventor **FORM** Hugh H. Trout, III Art Unit 3731 **Examiner Name** Melanie Tyson (to be used for all correspondence after initial filing) Attorney Docket Number 23660-00656 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Identify Terminal Disclaimer **Extension of Time Request** below): Response to Restriction Requirement Request for Refund **Express Abandonment Request** CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name KELLEY DRYE & WARREN LLP Signature Printed name

CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature Date

Reg. No.

43,565

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

OCT 1 2-2007

Effectiv		Complete if Known							
Fees pursuant to the Consolida	_ `	Application Number 10/66							
FEE TRANSMITTAL							tember 23, 2003		
For FY 2008							gh H. Trout, III		
							nie Tyson		
✓ Applicant claims small entity status. See 37 CFR 1.27				Art Unit 3731					
TOTAL AMOUNT OF PAYMENT (\$) 525.00			Attorney Docket No. 23660-00			0656			
METHOD OF PAYMENT	(check all	that apply)		· · · · · · · · · · · · · · · · · · ·					
Check Credit Card Money Order None Other (please identify):									
Deposit Account Deposit Account Number: 03-2469 Deposit Account Name: Collier Shannon Scott									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s)									
under 37 CFR WARNING: Information on this	1.16 and 1.	17		<u></u> 0.00	•			Provide credit card	
information and authorization			card fille	intraction another in	ot be mic	iluded on th	101111.1	Trovide Credit Card	
FEE CALCULATION									
1. BASIC FILING, SEAR									
	FILING F	FEES small Entity	SEAR	CH FEES Small Entity	EXA	NINATION Smail	N FEES Entity		
Application Type	Fee (\$)		Fee (\$)		<u>Fee</u>		(\$)	Fees Paid (<u>\$)</u>
Utility	310	155	510	255	210	0 10	5		
Design	210	105	100	50	130	0 6	5		_
Plant	210	105	310	155	160) 8	0		_
Reissue	310	155	510	255	620	31	0		_
Provisional	210	105	0	0	()	0		
2. EXCESS CLAIM FEE	S					F	ee (\$)	Small Entity Fee (\$)	
Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissues) 50 25									
Each independent claim over 3 (including Reissues)							210	105	
Multiple dependent claims							370	185	
<u>Total Claims</u> - 20 or HP =	Extra Clain	ns Fee (\$) x	Fee -	Paid (\$)		_	ultiple D Fee (\$)	Dependent Claims Fee Paid (\$)	
HP = highest number of total	claims paid fo						00 (0)	1001410101	
	Extra Clain			Paid (\$)					-
- 3 or HP = HP = highest number of indep	endent claims	paid for, if greater tha	an 3.						
3. APPLICATION SIZE I	FEE			(ldi	1	dealle fil	.d		
If the specification and listings under 37 CF									
sheets or fraction th		35 U.S.C. 41(a)(1)(G) a	and 37 CFR 1.1	6(s).				50
<u>Total Sheets</u> <u>Extra Sheets</u> <u>Number of each additional 50 or fraction thereof</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u>									
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Pald (\$)									
Other (e.g., late filing surcharge): Petition for Extension of Time (3 months) \$525.00									
SUBMITTED BY									
SUBMITTED BY Signature		AT B	<u></u>	Registration No.	3,565		Telepho	one 202.342.8400	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.